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0010/PTO  
Rev. 6/85

U.S. Department of Commerce  
Patent and Trademark Office

# **DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing

Attorney Docket Number

H 4136 PCT/US

First Named Inventor

LORENZ, Juergen

**COMPLETE IF KNOWN**

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**THERMOPLASTIC COMPOSITE MATERIAL**

the specification of which

(Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 04/28/2000 as United States Application Number or PCT International

Application Number PCT/EP00/03852 and was amended on (MM/DD/YYYY)                      (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
199 21 209.0	Germany	05/07/1999	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
		<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**DECLARATION**

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP00/03852	04/28/2000	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name  Customer Number  or label

OR

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
Wayne C. Jaeschke	21,062	Glenn E. J. Murphy	33,539
Kimberly R. Hild	39,224	Stephen D. Harper	33,243

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number  or label  00423 OR ☐ Fill in correspondence address below

Name  Glenn E. J. Murphy

Address  Henkel Corporation - Patent Department

Address  2500 Renaissance Boulevard, Suite 200

City  Gulph Mills State  PA ZIP  19406

Country  USA Telephone  610-278-4926 Fax  610-278-6548

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:  ☐ A petition has been filed for this unsigned

Given Name	Juergen	Middle Initial		Family Name	LORENZ	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Bopfingen	State		Country	Germany	Citizenship	Germany
Post Office Address	Brucknerstrasse 8						
Post Office Address							
City	73441 Bopfingen	State		Zip		Country	Germany
						Applicant Authority	

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

Given  
Name

Ewald

Middle  
InitialFamily  
Name

WILKA

Suffix  
e.g. Jr.Inventor's  
Signature

Date

Residence:  
City

Unterschneidheim

State

Country

Germany

Citizenship

Germany

Post Office Address

Schillerstrasse 16

Post Office Address

City

73485 Unterschneidheim

State

Zip

Country

Germany

Applicant  
Authority

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

Given  
NameMiddle  
InitialFamily  
NameSuffix  
e.g. Jr.Inventor's  
Signature

Date

Residence:  
City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

Zip

Country

Applicant  
Authority

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

Given  
NameMiddle  
InitialFamily  
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e.g. Jr.Inventor's  
Signature

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Post Office Address

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State

Zip

Country

Applicant  
Authority

Name of Additional Joint Inventor, if any:

☐

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Applicant  
Authority☐

Additional inventors are being named on supplemental sheet(s) attached hereto